

INTERAGENCY AGREEMENT (IA) DECISION MEMORANDUM
for NEW AWARD FUNDS-IN (Reimbursement IA)
Version 1.3

SUBJECT: Request for a **New** Interagency Agreement

FROM (Project Officer's Name): Earl Liverman

AAship or Region: Region 10

Approval Office Division: Office of Environmental Cleanup

TO: Interagency Agreement Shared Service Center (IASSC)

IASSC EAST
Frank Roth
Ariel Rios Building
1200 Pennsylvania Avenue, N.W.
Mail Code 3903R
Washington, D.C. 20460
Roth.Francis@epa.gov

IASSC WEST
Armina Nolan
Park Place Building
1200 Sixth Avenue, Suite 900
Mail Stop: OMP-145
Seattle, WA 98101
Nolan.Armina@epa.gov

SECTION A: IA Information

A1. IA ID Number (leave blank; to be provided by IASSC): _____

A2. Emergency IA: No

A3. Statutory Authority – Act: 23 U.S.C. 204 and 31 U.S.C. 1535

A4. Other Agency ID Number (if known): _____

A5. Funding Method/Billing Information: Repayment

SECTION B: EPA Contact Information

B1. Project Officer Information:

Name	Earl Liverman
Address (include mail code)	1910 Northwest Boulevard, Suite 208, Coeur d'Alene, ID 83814
Telephone	Land - 208.664.4858; Cell - 208.651.8709
Fax	208.664.5829
Email	

B2. Project Officer Certification Status

"I certify my Project Officer certification status is current." (Initials: _____)

B3. Will this IA contains contractual services valued over \$200,000? **Select one:** YES or NO

B3a. **If YES** - Is your EPA Project Officer COR (Contracting Officer Representative) certification status current? **Select one:** YES or NO

B3b. **If NO** – You cannot be the IA Project Officer for this IA.

SECTION C: Other Agency Information

C1. Agency Name: U.S. Department of Commerce

C2. Division Name: Federal Highway Administration, Western Federal Lands Highway Division

C3. Agency Project ID number: ID PFH 50(9)

C4. Business Event Type Code (BETC): DISB

C5. DUNS Number: 139-768-597

C6. Agency's Address: Federal Highway Administration, Western Federal Lands Highway Division, 610 East Fifth Street, Vancouver, WA 98661-3801

C7. Project Manager's Information:

Name	Michael Traffalis
Title	COTR
Address (include mail code) (if different from Agency's Address)	Same as Agency Address
Telephone	360.619.7787
Fax	360.619.7845
Email	Michael.Traffalis@fhwa.dot.gov

C8. Authorizing Official's Information:

Name	Marlene M. Marcellay
Title	Contracting Officer
Address (include mail code) (if different from Agency's Address)	Same as Agency Address
Telephone	
Fax	
Email	

C9. Other Agency Location Code (ALC): 69-05-0001

C10. Other Agency Treasury Account Symbol (TAS): 69-8083

C11. Other Agency Billing Instructions and Frequency: Bill via Interagency Payment and Collection (IPAC) to FHWA's Finance Contact. Frequency – weekly.

C12. EPA Account Information (required by OCFO):

FY	Appr Code	Budget Org	PRC	Object Class	Site Project	Cost Org

SECTION D: Justification for IA

D1. Project or Program Title/Description: Avery Landing Removal Action

D2. Describe the proposed project's objectives and how the IA will accomplish them. The objectives must be consistent with the statutory authority for the agreement. If the funded work is part of a larger project, the description of the project should be clear as to which parts of the work will be funded by the IA and which will not.

EPA is performing cleanup activities and oversight of cleanup activities for the Avery Landing Site, which is comprised of several parcels of real property. The scope of this IA is limited to the cleanup of soil contaminated by oil and hazardous substances for that portion of the Site which is owned by the United States and administered by the Federal Highway Administration (FHWA).

D3. The alternatives to an IA the office considered and why the IA mechanism was selected.

No alternatives to an IA were considered. An IA is the appropriate funding mechanism between two federal agencies.

D4. Provide an explanation of why the other agency was selected or why the other agency selected EPA.

As part of the Site-wide cleanup effort described above in subsection D2, the FHWA elected to take advantage of EPA's cleanup expertise and experience, as opposed to contracting with a private cleanup contractor to perform cleanup of real property owned by the United States.

D5. PO certifies that the cost of the proposed work is reasonable.

"I certify that the cost of the proposed work is reasonable, considering efficiency, based on an independent estimate of cost or other appropriate cost information developed by EPA and the FHWA. The determination is documented in the program office file."

(Initials: _____)

D6. Project/Budget Period: From 1 April 2012 through 2 December 2013.**

**In accordance with GPI-08-02, the total project period may not exceed seven years without specific regulatory or statutory authorization for a longer period, or a signed waiver. If a waiver has been obtained to allow a longer project/budget period, please attach a copy of the approval or reference the class waiver approval.

D7. Is the IA project duration exceeding seven (7) years? No.

D7a. If **YES** please provide justification or attach/reference the class waiver approval date (if any).

D8. **Pre-Award Costs:** Does this IA include pre-award costs? No.

D8a. **If YES** to pre-award costs, please provide justification and pre-award costs terms and conditions. Justification must include the following information: (1) A discussion of the activities conducted prior to the execution of the IA; (2) An explanation of why it was necessary to undertake activities prior to the execution of the IA; and (3) A statement that the EPA representative authorized the activities to be conducted prior to the execution of the IA.

SECTION E: Financial Information

E1. Total Approved EPA Amount THIS ACTION: \$ 0
(This amount must match with the CN document)

E2. Total **Other Agency** Amount (if any): \$3,000,000

E3. Total Approved Project Costs THIS ACTION: \$3,000,000

E4. Approved Budget (*The total approved budget must equal F3*):

APPROVED BUDGET		EPA IA Identification Number	
Budget Categories	EPA Itemization of This Action	In-Kind Itemization of This Action	Itemization of Total Project Cost to Date
a. Personnel	\$ 36,000	\$	\$ 36,000
b. Fringe Benefits	\$	\$	\$
c. Travel	\$ 64,000	\$	\$ 64,000
d. Equipment	\$	\$	\$
e. Supplies	\$	\$	\$
f. Procurement/Assistance	\$	\$	\$
g. Construction	\$2,896,472	\$	\$2,896,472
h. Other (e.g., M&S expense)	\$	\$	\$
i. Total Direct Charges	\$	\$	\$
j. Indirect Costs (Whether or not indirect costs are charged, please complete E5)	\$ 3,528	\$	\$ 3,528
k. Total	\$3,000,000	\$	\$3,000,000

E5. **INDIRECT COSTS:** Indirect Cost Rate 9.8%

EPA Project Officer must indicate the rate which must be consistent with the policy. EPA rates can be found at

http://intranet.epa.gov/ogd/indirect/report/FY_2009_IA_Reimbursable_Indirect_Cost_Billing_Rates.pdf

For all Funds-in IAs, the approved budget category must include indirect costs. IAs for Working Capital Fund and Shared Services (e.g., erulemaking and ASSERT) are exempt from this requirement because they already include indirect costs. The Agency Indirect Costs Allocation System policy can be located at <http://intranet.epa.gov/ocfo/policies/resource.htm>.

- [2540-13 Cost Accounting Methods Standard \(PDF\)](#) (4pp, 127K) **New!** 1/26/2009
 - [2540-13-P1 Agency Indirect Cost Allocation System for Funds-In Interagency Agreements \(PDF\)](#) (20pp, 132K) 1/26/2009
 - [2540-13-P2 Recognizing Full Costs for Funds-In Interagency Agreements \(PDF\)](#) (6pp, 49K) 1/26/2009
 - [2540-13-T1 Full Cost Funds-In Interagency Agreements \(PDF\)](#) (6pp, 97K) 1/26/2009

SECTION F: Equipment & Extramural Information

F1. **Equipment for Reimbursable IAs - Select (a) or (b):**

 X (a) EPA, including EPA contractors, will NOT be purchasing any personal property or Equipment under this IA.

 (b) EPA and/or EPA contractors will purchase personal property/equipment under this IA. Applicable guidelines/procedures will be followed as provided by the Other Agency.

F1a. List all equipment items costing \$1,000 or more. _____

F2. **Extramural:** Are any of these funds being used on extramural agreements?

Select one: YES

If **YES** - What type of extramural agreement and amount? **PO must complete F2a thru F2d.**

F2a. Type of extramural agreement:

Select one or more: CONTRACT

F2b. Total amount of Extramural agreements: \$2,750,000 (estimate)

F2c. Identify contractors or assistance recipients that will receive IA funds: EPA START and ERRS contractors along with other contractors yet to be determined.

F2d. If a Grant or Cooperative Agreement will be funded, the Project Officer **must review** and **initial** the following statement:

"I certify the principal purpose of the assistance transaction is to accomplish a public purpose of support or stimulation authorized by Federal Statute". (Initials: _____)

SECTION G: Other Information

G1. **Quality Assurance (QA):** Does this IA include generation of environmental data, or use of existing environmental data? YES

G1a. If **YES** - Are the proposed measurement activities covered by an existing or draft Quality Management Plan (QMP) or Quality Assurance Project Plan (QAPP)? YES

G1b. If NO - Please include QA terms and conditions.

G1b. If **YES** - Are the QA plans or QA documents required for this IA approved? YES

G1c. If NO - Please include QA terms and conditions.

G1c. If **YES** - Are there new or additional environmental measurement activities anticipated which are not covered by the existing approved QMP or QAPP? NO

G1d. If **YES** - Please include QA terms and conditions.

Note to PO: Please refer to "Interagency Agreement Policies, Procedures, and Guidance Manual 2008, page 4-23 and 4-24" for samples of QA terms and conditions. Contact your Regional or Headquarters Quality Assurance Office for assistance in determining whether a Quality Assurance Plan is required for your IA project.

G2. **Travel:** Will travel be funded under this agreement? YES

G2a. If **YES** - the Project Officer must **certify** and **initial** the statement listed below.

"I certify that the travel to be completed by EPA is not for the purpose of exceeding the travel ceiling or similar limitation. EPA staff would not make the trips planned under this agreement, except to complete the project."

(Initials: _____)

G3. **International Travel:** Does the Scope of Work include project activities or travel which will be

performed entirely or in part outside of the United States? NO

G3a. If **YES** - Project Officer must indicate the date the application was sent to OIA (Office of International Affairs) for review and approval.

Date Sent to OIA: _____ or attach a copy of OIA's clearance form.

Note to PO: *The IA award document cannot be funded until the OIA clearance is approved.*

G4. **Use of EPA Space or Equipment:** Will the use of EPA space or equipment be necessary for the accomplishment of this IA? NO

G4a. If **YES** – PO **must certify** the statement below:

"I certify that I have coordinated with my Budget Analyst/Administrative Officer and have received concurrence to fund this IA." **(Initials: _____)**

G5. **Multiple Appropriations:** Will this IA be funded by more than one appropriation? NO
For more information refer to GPI 01-02: Multiple Appropriations Award Policy.

G5a. If **YES** – PO must include the following:

1. Certification that the activities stated in the work plan are properly chargeable to each of the appropriations cited; and

2. A drawdown methodology, i.e., how much of each requested payment is to be charged to each appropriation? The PO may specify that each drawdown will be charged to each appropriation based upon each appropriation's percentage of the total funding. For example, if 1/4 of the funding is E, or STAG, funding, and 3/4 of the funding is B, or EPM, then each drawdown could be charged 1/4 to E and 3/4 to B. Or, the PO may decide that drawdowns will first be applied to only one appropriation until that appropriation's funding is exhausted, then the next appropriation cited will be used. [Recommended: If a mix of B and E money is to be used, the PO should specify that all B money is to be used first. This will avoid the possible problem addressed in H7.]

G6. **Fixed Year Funding:** Will this agreement be funded in whole or in part by fixed-year funding? NO
[Fixed-year funding is any funding which expires, e.g., 688/90108 expires on September 30, 2009.]

G6a. If **YES** – PO will comply with the Other Agency's Terms and Conditions.

Fixed-year funding, when used in an IA, poses a special problem for both the funding Agency and the recipient Agency. Due to fiscal requirements, both Agencies must determine, at the end of the fixed-year period, how much of the funding has not been obligated or disbursed by the receiving Agency. Any funds not disbursed or obligated by the receiving Agency on or before the expiration date must be deobligated by the providing Agency.

G7. Program Income: Is this project expected to generate program income? NO

G7a. If YES - **PO must select one** of the following methods for program income disposition.

___ (a) **Deduction Method:** Program income will be deducted from total allowable costs to determine net allowable costs. Deduction will be applied to funds provided by EPA and the recipient Agency in proportion to funding provided. For example, if EPA and the recipient Agency share equally in the funding provided for the IA, any program income will be applied equally to both funding sources to reduce each Agency's cost share.

___ (b) **Addition Method:** Program income will be added to the funding provided by EPA and the recipient Agency to increase total allowable project costs.

___ (c) **Cost Share Method:** Program income will be allowed as part of the recipient Agency's cost share.

___ (d) **Other Method:** Which might be any combination of the above. (PO must describe other method) _____

G8. Human Subjects: Does the IA involve human subjects? NO

G8a. If **YES** - Please attach a copy of the approval by EPA's Human Subjects Research Review Official.

G9. Animal Subjects: Does the IA involve animal subjects? NO

G9a. If **YES** - Please attach a copy of the approval.

Section H: Terms and Conditions

Please provide any programmatic terms and conditions to include in this agreement. They may be listed below or included as an attachment. (Please also send an electronic version of the terms and conditions to the IA Specialist):

Note to PO: The following T&C will be included in the funds-in IA award document:

- Resolution of Disagreements
- Cost Collection Upon Cancellation
- Other Agencies' Requirements

SECTION I: Additional Instructions/Information

Please list any additional instructions/information regarding this agreement (i.e., source of funding, information related to questions above, etc.). Please list below or include as an attachment

SECTION J: Signatures/Certifications

PROJECT OFFICER:

As the Project Officer, I certify that the information in this decision memorandum is complete and correct. I am requesting that the subject Interagency Agreement be awarded.

Signature: _____ Date: _____
Print Name: _____

RECOMMENDING OFFICIAL (e.g., Unit Manager):

As the Recommending Official, I certify that I have reviewed this decision memorandum and its attachments. I am recommending that the subject Interagency Agreement be awarded.

Signature: _____ Date: _____
Print Name: _____

APPROVAL OFFICIAL (e.g., Office Director):

As the Approval Official, I have reviewed this decision memorandum and its attachments. I have determined that resources are available and authorized for the above objectives. I hereby approve award of the subject Interagency Agreement.

Signature: _____ Date: _____
Print Name: _____

SENIOR RESOURCE OFFICIAL (e.g., Assistant Regional Administrator): - Required if IA total project amount is over \$1 million (EPA Order 1130.2A 11/06/1995).

As the Senior Resource Official, I have reviewed this decision memorandum and its attachment. I hereby approve and support award of the subject Interagency Agreement.

Signature: _____ Date: _____
Print Name: _____

PROJECT DURATION WAIVER (e.g., Senior Resource Official): - Required if IA budget/project period duration is beyond seven (7) years.

As the Senior Resource Official, I have determined that extending this IA beyond the 7-year limit established by Guidance Principle 1, Interagency Guidance Policy Issuance IPI 08-02, and Grants Policy Issuance GPI 08-02, February 29, 2008, is in accordance with OGD's class waiver. As allowed by Stefan Silzer's class waiver letter, July 21, 2008, I hereby approve extending the project/budget period for this IA beyond the 7-year limit.

Signature: _____ Date: _____
Print Name: _____

Section K: Attachments

- * Scope of Work
- * Other Federal Agency form or document